

| ORDER FOR SUPPLIES AND SERVICES | | | | IMPORTANT: See instructions in GSAR 553.370-300-1 for distribution | | PAGE 1 OF 1 PAGE(S) | |
|---|------------------------------|--|-------------------|---|---------------------|---|-------------|
| 1 DATE OF ORDER 11/24/2015 | | 2 ORDER NUMBER GSQ0316DS0004 | | 3 CONTRACT NUMBER GS00Q09BGD0020 | | 4 ACT NUMBER A21984147 | |
| FOR GOVERNMENT USE ONLY | 5. ACCOUNTING CLASSIFICATION | | | | 6. FINANCE DIVISION | | |
| | FUND 285F | ORG CODE Q03FA000 | B/A CODE AA20 | O/C CODE 25 | AC | SS | VENDOR NAME |
| | FUNC CODE AF151 | C/E CODE H08 | PROJ /PROS NO. | CC A | MDL | FI | G/L DEBT |
| | W/ITEM | CC-B | PRT./CRFT | AI | LC | DISCOUNT | |
| 7. TO: CONTRACTOR (Name, address and zip code) Alfred E. Buford CACI INC FEDERAL 14370 Newbrook Drive CHANTILLY, VA 20151-2218 United States (703) 679 4177 | | | | 8. TYPE OF ORDER B. DELIVERY | | REFERENCE YOUR | |
| | | | | Please furnish the following on the terms specified on both sides of the order and the attached sheets, if any, including delivery as indicated | | | |
| | | | | This delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above numbered contract. | | | |
| | | | | C. MODIFICATION NO. 000 TYPE OF MODIFICATION: | | AUTHORITY FOR ISSUING | |
| 9A EMPLOYER'S IDENTIFICATION NUMBER 541008371 | | 9B CHECK, IF APPROP WITHHOLD 20% | | Except as provided herein, all terms and conditions of the original order, as heretofore modified, remain unchanged. | | | |
| 10A. CLASSIFICATION Other than one of the preceding | | | | 10B. TYPE OF BUSINESS ORGANIZATION C. Corporation | | | |
| 11. ISSUING OFFICE (Address, zip code, and telephone no.) G A Region 3 Christine Chaapel 20th N Eighth St, 10th Floor Philadelphia, PA 19107-3191 United States (215) 446-5857 | | 12. REMITTANCE ADDRESS (MANDATORY) CACI INC FEDERAL PO BO 630967 BALTIMORE,MD 21263-0967 United States | | 13. SHIP TO(Consignee address, zip code and telephone no.) Susan M Showler 6007 Combat Drive Aberdeen Proving Ground, MD 21005 United States 443-395-2454 | | | |
| 14. PLACE OF INSPECTION AND ACCEPTANCE Susan M Showler 6007 Combat Drive Aberdeen Proving Ground, MD 21005 United States | | 15. REQUISITION OFFICE (Name, symbol and telephone no.) Shail S. Shah GSA Region 3 20 N 8th t Philadelphia, PA 19107-3191 United States 215-446-5858 | | | | | |
| 16. F.O.B. POINT Destination | | 17. GOVERNMENT B/L NO | | 18. DELIVERY F.O.B. POINT ON OR BEFORE 11/29/2016 | | 19. PAYMENT/DISCOUNT TERMS NET 30 DAYS / 0 00 % 0 DAYS / 0 00 % 0 DAYS | |
| <p align="center">20. SCHEDULE</p> <p>Cost Plus Fixed Fee (CPFF) Task Order GSQ0316DS0004 is awarded for Project Leader Network Enablers (PL NET E) Production and Post Deployment System Support (PPDSS) for the U.S. Army Program Executive Office for Command, Control, Communications and Tactical (PEO C3T).</p> <p>The Period of Performance includes a Base period of 11/30/2015 through 11/29/2016 with four one-year Option periods.</p> <p>This task order incorporates the Performance Work Statement and Quality Assurance Surveillance Plan under ITSS ID03150025 and accepts the contractor's proposal submitted on 11/12/2015.</p> <p>The total potential task order value over the entire period of performance is \$56,308,140.66 (composed of \$10,780,582.13 for the base year; \$11,887,559.75 for Option Year 1; \$11,689,199.92 for Option Year 2; \$10,888,568.25 for Option Year 3; and \$11,062,230.62 for Option Year 4).</p> <p>Incremental funding is hereby provided in the amount of \$8,766,990.29 and is applied as follows</p> <p>CLIN 0003 PROGRAM MANAGEMENT (PM) (b) (4)</p> | | | | | | | |

CLIN 0004 CONFIGURATION / INTEGRATION /INTEROPERABILITY SUPPORT (b) (4)
 CLIN 0005 SYSTEM AND SOFTWARE DEVELOPMENT SUPPORT/ANALYSIS (b) (4)
 CLIN 0006 ACES SOFTWARE RE-BASELINE (b) (4)
 CLIN 0007 SOFTWARE TESTING/EVALUATION AND LAB OPERATIONS (b) (4)
 CLIN 0008 TECHNICAL DATA PACKAGE QUALITY CONTROL PROGRAM PLAN (b) (4)
 CLIN 0009 PRODUCT SECURITY SUPPORT (b) (4)
 CLIN 0010 TRAINING AND FIELD SUPPORT (b) (4)
 CLIN 0011 HELP DESK SUPPORT (b) (4)
 CLIN 0012 EXERCISES, EXPERIMENTS/EVENTS AND DEMONSTRATIONS (b) (4)
 CLIN 0013 Travel in support of all CLINS with the EXCEPTION of CLIN 006 (b) (4)
 CLIN 0014 Travel in support of CLIN 006 (b) (4)
 CLIN 0015 ODC(s) in support of all CLINS with the EXCEPTION of CLIN 006 (b) (4)
 CLIN 0016 ODC in support of CLIN 006 (b) (4)
 CLIN 0017 BASE YEAR CAF FEE (b) (4)

In accordance with FAR 52-232-20 Limitation of Cost, the Contractor shall not exceed this amount without prior authorization from the GSA Contracting Officer.

| ITEM NO. (A) | SUPPLIES OR SERVICES (B) | QUANTITY ORDERED (C) | UNIT (D) | UNIT PRICE (E) | AMOUNT (F) |
|-----------------|---|----------------------------|-------------|-------------------|---------------|
| 0003 | PROGRAM MANAGEMENT (PM) | 1 | lot | (b) (4) | |
| 0004 | CONFIGURATION / INTEGRATION /INTEROPERABILITY SUPPORT | 1 | lot | (b) (4) | |
| 0005 | SYSTEM AND SOFTWARE DEVELOPMENT SUPPORT/ANALYSIS | 1 | lot | (b) (4) | |
| 0006 | ACES SOFTWARE RE-BASELINE | 1 | lot | (b) (4) | |
| 0007 | SOFTWARE TESTING/EVALUATION AND LAB OPERATIONS | 1 | lot | (b) (4) | |
| 0008 | TECHNICAL DATA PACKAGE QUALITY CONTROL PROGRAM PLAN | 1 | lot | (b) (4) | |
| 0009 | PRODUCT SECURITY SUPPORT | 1 | lot | (b) (4) | |
| 0010 | TRAINING AND FIELD SUPPORT | 1 | lot | (b) (4) | |
| 0011 | HELP DESK SUPPORT | 1 | lot | (b) (4) | |
| 0012 | EXERCISES, EXPERIMENTS/EVENTS AND DEMONSTATIONS | 1 | lot | (b) (4) | |
| 0013 | Travel in support of all CLINS with the EXCEPTION of CLIN 006 | 1 | lot | (b) (4) | |
| 0014 | Travel in support of CLIN 006 | 1 | lot | (b) (4) | |
| 0015 | ODC(s) in support of all CLINS with the EXCEPTION of CLIN 006 | 1 | lot | (b) (4) | |
| 0016 | ODC in support of CLIN 006 | 1 | lot | (b) (4) | |
| 0017 | BASE YEAR CAF FEE | 1 | lot | (b) (4) | |

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|---|---|--------------------------------------|----------------|
| 21. RECEIVING OFFICE (Name, symbol and telephone no.) PEO C3T Project Director Network Enablers, 443-395-2454 | | TOTAL From 300-A(s) | |
| 22. SHIPPING POINT Specified in QUOTE | 23. GROSS SHIP WT. | GRAND TOTAL | \$9,766,990.29 |
| 24. MAIL INVOICE TO: (Include zip code) General Services Administration (FUND) The contractor shall follow these Invoice Submission Instructions . The contractor shall submit invoices electronically by logging into the ASSIST portal (https://portal.fas.gsa.gov), navigating to the appropriate order, and creating the invoice for that order. For additional assistance contact the ASSIST Helpdesk at 877-472-4877. Do NOT submit any invoices directly to the GSA Finance Center (neither by mail nor via electronic submission). | 25A. FOR INQUIRIES REGARDING PAYMENT CONTACT: GSA Finance Customer Support | 25B. TELEPHONE NO. 816-926-7287 | |
| | 26A. NAME OF CONTRACTING/ORDERING OFFICER(Type) Christine Chaapel | 26B. TELEPHONE NO. (215) 446-5857 | |
| | 26C. SIGNATURE Christine Chaapel 11/24/2015 | | |

